

**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) OR

Attorney Docket Number	21494Y
First Named Inventor	Thomson, Wayne, et al
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

4-CYCLOALKYLAMINOPYRAZOLO PYRIMIDINE NMDA/NR2B ANTAGONISTS

the specification of which *(Title of the Invention)*

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/495,650	08/15/2003	21494PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
60/495,650	08/15/2003	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☐ Practitioners Associated with the Customer Number
 OR
☒ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number
David A. Rubin	40,314		

Direct all correspondence to: ☒ Customer Number

Name	David A. Rubin				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-	Fax	(732)594-

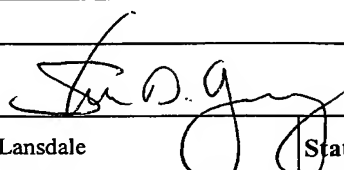
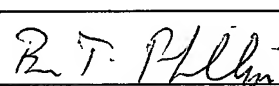
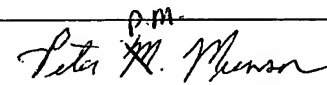
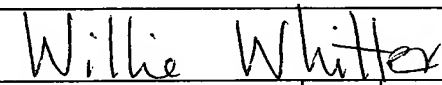
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname			
Wayne		Thompson			
Inventor's Signature	<i>Wayne W. Thompson</i>			Date	<i>July 28, 2004</i>
Residence: City	Landsdale	State	PA	Country	USA
				Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4				
City	West Point	State	PA	ZIP	19486
				Country	U.S.A.

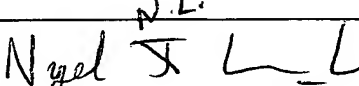
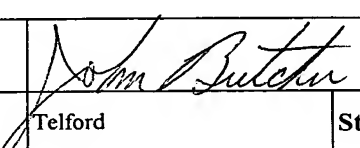
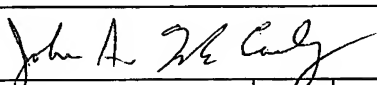
☒ Additional inventors are being named on the _____ supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Steven D.				Young			
Inventor's Signature				Date	July 28, 2004		
Residence: City	Lansdale	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Brian T.				Phillips			
Inventor's Signature				Date	July 28, 2004		
Residence: City	Telford	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Peter				Munson			
Inventor's Signature				Date	28 July 2004		
Residence: City	Harleysville	State	PA	Country	USA	Citizenship	19438
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Willie				Whitter			
Inventor's Signature				Date	7-28-04		
Residence: City	West Point	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Nigel				Liverton			
Inventor's Signature						Date	28th July 2004
Residence: City	Harleysville	State	PA	Country	USA	Citizenship	GB
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Christine				Dieckhaus			
Inventor's Signature						Date	
Residence: City	North Wales	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
John				Butcher			
Inventor's Signature						Date	July 28 2004
Residence: City	Telford	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
John A.				McCauley			
Inventor's Signature						Date	28 July 2004
Residence: City	Maple Glen	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.

DECLARATION AND POWER OF ATTORNEY

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname						
Charles J.					McIntyre						
Inventor's Signature		<i>Charles J. McIntyre</i>					Date		Jul. 28, 2004		
Residence: City		Lansdale		State		PA		Country		USA	
Mailing Address		Merck Research Laboratories, Sumneytown Pike, P.O. Box 4									
City		West Point		State		PA		ZIP		19486	
								Country		U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname						
Inventor's Signature							Date				
Residence: City				State				Country			
Mailing Address											
City				State				ZIP			
								Country			
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Inventor's Signature							Date				
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Mailing Address											
City				State				ZIP			
								Country			
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Inventor's Signature							Date				
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Mailing Address											
City				State				ZIP			
								Country			

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Mark E.				Layton			
Inventor's Signature	<i>Mark E. Layton</i>					Date	10-Aug-2004
Residence: City	Harleysville	State	PA	Country	US	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Philip E.				Sanderson			
Inventor's Signature	<i>Philip Sanderson</i>					Date	10-Aug-2004
Residence: City	Valley Forge	State	PA	Country	USA	Citizenship	British
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	
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Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	

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 PATENT APPLICATION
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☐ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	21494Y
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COMPLETE IF KNOWN	
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Filing Date	
Group Art Unit	
Examiner Name	

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4-CYCLOALKYLAMINOPYRAZOLO PYRIMIDINE NMDA/NR2B ANTAGONISTS

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/495,650	08/15/2003	21494PV

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I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
60/495,650	08/15/2003	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☐ Practitioners Associated with the Customer Number
 OR
☒ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number
David A. Rubin	40,314		

Direct all correspondence to: ☒ Customer Number

Name	David A. Rubin				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway		State	NJ	ZIP 07065-0907
Country	USA	Telephone	(732)594-		Fax (732)594-

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])			Family Name or Surname		
Wayne			Thompson		
Inventor's Signature					Date
Residence: City	Landsdale	State	PA	Country	USA
				Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4				
City	West Point		State	PA	ZIP 19486
				Country	U.S.A.

☒ Additional inventors are being named on the _____ supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

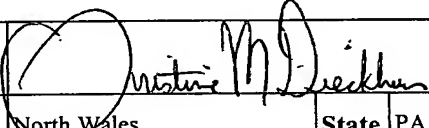
DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Steven D.				Young			
Inventor's Signature						Date	
Residence: City	Lansdale	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Brian T.				Phillips			
Inventor's Signature						Date	
Residence: City	Telford	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Peter				Munson			
Inventor's Signature						Date	
Residence: City	Harleysville	State	PA	Country	USA	Citizenship	19438
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Willie				Whitter			
Inventor's Signature						Date	
Residence: City	West Point	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Nigel				Liverton			
Inventor's Signature						Date	
Residence: City	Harleysville	State	PA	Country	USA	Citizenship	GB
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Christine				Dieckhaus			
Inventor's Signature						Date	05 Aug 2004
Residence: City	North Wales	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
John				Butcher			
Inventor's Signature						Date	
Residence: City	Telford	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
John A.				McCauley			
Inventor's Signature						Date	
Residence: City	Maple Glen	State	PA	Country	USA	Citizenship	US
Mailing Address	Merck Research Laboratories, Sumneytown Pike, P.O. Box 4						
City	West Point	State	PA	ZIP	19486	Country	U.S.A.

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name (first and middle [if any])					Family Name or Surname											
Charles J.					McIntyre											
Inventor's Signature							Date									
Residence: City		Lansdale		State		PA		Country		USA		Citizenship		US		
Mailing Address		Merck Research Laboratories, Sumneytown Pike, P.O. Box 4														
City		West Point			State		PA		ZIP		19486		Country		U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name (first and middle [if any])					Family Name or Surname											
Inventor's Signature							Date									
Residence: City				State				Country				Citizenship				
Mailing Address																
City					State				ZIP				Country			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name (first and middle [if any])					Family Name or Surname											
Inventor's Signature							Date									
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Mailing Address																
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Inventor's Signature							Date									
Residence: City				State				Country				Citizenship				
Mailing Address																
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Given Name (first and middle [if any])					Family Name or Surname											
Inventor's Signature							Date									
Residence: City				State				Country				Citizenship				
Mailing Address																
City					State				ZIP				Country			